

State of South Dakota
Statement of Financial Interest
Candidate for Public Office



RECEIVED
JAN 11 2005

SEC. OF STATE

File statement in the office where your nominating petition or convention nomination certification was filed.

Please read information on reverse side before completing this form.

1. Name Gary L. Jerke

2. Address 29123 416th Avenue Tripp, S.D. 57376

3. Office Sought State Representative

4. What is your occupation/profession? Financial Representative

5. List any enterprise which accounted for more than ten percent of, or contributed more than \$2,000 to, your family's (includes spouse, minor children living at home) gross income in the preceding calendar year. Identify who receives the income from each enterprise.

Naal Open Door - ~~Tamara Jerke~~ \$2000

Home Instead Senior Care

Thrivent Financial for Lutherans

Heritage Acres Farm

What is the nature of your immediate family's association with each? The value of the financial interest need not be reported.

Tamara, wife Representative

Tamara, wife Owner-Employer

Gary Independent Contractor

Gary Owner-manager

6. List any enterprise in which you, your spouse or minor children living at home control more than ten percent of the capital or stock. Identify who has the ownership interest in each enterprise.

Home Instead, LLC

What is the nature of your immediate family's association with each?

2nd owner

Filed this 18th

day of

January 05

Chi Nelson
SECRETARY OF STATE

State of South Dakota)

) SS.

County of Hughes

Verification

I have reviewed paragraphs 1 through 6 of the Information Regarding Statement of Financial Interest (attached), my Statement of Financial Interest and certify that the information reported is a complete, true and accurate representation of my financial interests for the preceding calendar year.

(Signed) [Signature]

Subscribed before me this 11th day of January, 2005.

(Seal) [Signature]

Revised 1997

Officer Administering Oath
My commission expires: Feb 1, 2009

2 2005

SECRETARY OF STATE
completing this

3. Elected Office State Representative

My commission expires: _____